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23696 7590 07/06/2010					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEB address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
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APPLICATION NO. FILING DATE		FIRST NAMED INVEN		TOR	R ATTORNE		Y DOCKET NO. CONFIRM		RMATION NO	
10/780,539 02/17/2004 Rajiv Laroia 060569 7486 ITTLE OF INVENTION: EFFICIENT AUTOMATIC REPEAT REQUEST METHODS AND APPARATUS										
APPLN. TYPE	SMALL ENTITY	ISSUE PEE DUE	PUBLICATION FEE D	UE. PREV	PREV. PAID ISSUE FEE		AL FEE(S) DUE		DATE DUE	
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EXAMINER		ART UNIT	CLASS-SUBCLASS							
SHAND, RO	BERTA A	2472	370-333000							
I. Change of corresponder CFR 1.363). Change of corresponder	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, afternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.									
3. ASSIGNEE NAME AN	ND RESIDENCE DATA	A TO BE PRINTED ON T	THE PATENT (print o	r type)	edecette de la constant de la consta					
PLEASE NOTE: Unle recordation as set forth	ess an assignce is ident in 37 CFR 3.11. Com	ified below, no assignee eletion of this form is NO	data will appear on the	e patent.	II an assignee nent.	e is identific	d below, the doc	ument	has been filed	1 for
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)							
QUALCOMM :	San Diego, California									
Please check the appropri	ate assignee category or	categories (will not be pr	rinted on the patent):	🔲 Indivi	idual X Con	posation or o	ther private grou	p entity	/ 🗖 Governs	ment
4a. The following fee(s) a lissue Fee Publication Fee (No Advance Order - #	D. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 170026 (enclose an extra copy of this form).									
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an application. Confident submitting the completed his form and/or suggestic Box 1450. Alexandria, Vi Alexandria, Virginia 2231	iality is governed by 35 application form to the one for reducing this burging 22313-1450. DC 3-1450.	PR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to th ONOT SEND FEES OR of persons are required to re-	1.14. This collection is depending upon the it e Chief Information Of COMPLETED FORMS	or retain a s estimated adividual c fficer, U.S. S TO THIS	benefit by the to take 12 m ase. Any con Patent and T ADDRESS.	e public which inutes to con aments on the rademark Of SEND TO: (ch is to file (and to implete, including the amount of time office, U.S. Depart Commissioner for	gather 2 you r Iment o r Pater	ing, preparing, equire to comp of Commerce, ets, P.O. Box 1	and plete P.O.

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